Harnett County Department of Public Health 19446 HTE# 177-50016795 PERMIT # 23660 **Operation Permit** Name: (owner) Control Craftian SUBDIVISION Craftian Line SubDIVISION Craftian Line SUBDIVISION Craftian SUBDIVISION SUBDIVISION CRAFTIAN SUBDIVISION CRAFTIAN SUBDIVISION CRAFTIA System Installer: Tecl Brown Registration # Basement with plumbing: Garage Number of Bedrooms Type of Water Supply:
Community Public Well Distance from well System Type:
Types V and VI System Types V and VI Systems expire in 5 years. (In accordance with Table V a) Owner must contact Health Department 6 months prior to expiration for permit renewal. This system has been installed in compliance with applicable North Carolina General Statutes, Rules for Sewage Treatment and Disposal, and Disposal, and all conditions of the Improvement Permit and Construction Authorization. PERMIT CONDITIONS: 1. Performance: System shall perform in accordance with Rule .1961. II. Monitoring: As required by Rule .1961. III. Maintenance: As required by Rule .1961. Other: Subsurface system operator required? Yes
No If yes, see attached sheet for additional operation conditions, maintenance and reporting. IV. Operation: V. Other: Following are the specifications for the sewage disposal system on the above captioned property. Other Why to Quell T Size of tank: Septic Tank: Type of system: Conventional gallons Pump Tank: exact length Subsurface width of Drainage Field ditches ________ ditches ditches French Drain Required: Linear feet Authorized State Agent !